PTO/SB/30/09-06)
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## Request 10/667,004 Application Number for Filing Date September 19, 2003 Continued Examination (RCE) Transmittal First Named Inventor Selena CHAN Address to: MS RCE Art Unit 1634 Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 **Examiner Name** F. W. M. Lu

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

Attomey Docket Number

8, 1995, or to any design application.				
1. Submission required under 37 CFR 1.114 Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).				
a. Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.				
i. Consider the arguments in the Appeal Brief or Reply Brief previously filed on				
ii. Other				
b. x Enclosed				
i. X Ame	Amendment/Reply iii. x Information Disclosure Statement (IDS)			
ii. Affic	davit(s)/Declaration(s) iv. Other			
2. Miscellaneous				
a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a				
period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)				
b. Other				
3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.				
a. X  The Director is hereby authorized to charge the following fees, any underpayment of fees, or credit any overpayments to Deposit Account No.  O3-1952  Have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached this submission in duplicate.				
i. X RCE fee required under 37 CFR 1.17(e)				
ii. Extension of time fee (37 CFR 1.136 and 1.17)				
iii. Other				
b. Check in	n the amount of \$e	enclosed		
c. Payment by credit card (Form PTO-2038 enclosed)				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED				
Signature		Date	January	30, 2007
Name (Print/Type)	Jonathan Bockman	Regist	ation No.	45,640

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PTO/SB/17 (07-06) Approved for use through 01/31/2007. OMB 0551-0032

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Under the Paperwalk Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known TRABENA! Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/667,004 **Application Number** TRANSMITTAL Filing Date September 19, 2003 Selena CHAN First Named Inventor For FY 2006 Examiner Name F. W. M. Lu Applicant claims small entity status. See 37 CFR 1.27 1634 Art Unit 070702006420 **TOTAL AMOUNT OF PAYMENT** Attorney Docket No. METHOD OF PAYMENT (check all that apply) None Other (please identify): Check Credit Card Money Order Morrison & Foerster LLP x Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee x | Charge fee(s) indicated below Charge any additional fee(s) or underpayment of x | Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **SEARCH FEES EXAMINATION FEES FILING FEES Small Entity** Small Entity **Small Entity** Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) 500 200 100 Utility 300 150 250 100 50 130 65 Design 200 100 Plant 200 100 300 150 160 80 Reissue 300 150 500 250 600 300 200 0 0 n 0 Provisional 100 **Small Entity** 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 Multiple Dependent Claims Fee Paid (\$) **Total Claims** Extra Claims Fee (\$) Fee Paid (\$) Fee (\$) - 20 = HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Fee Paid (\$) Number of each additional 50 or fraction thereof Fee (\$) Extra Sheets (round up to a whole number) x - 100 = 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 ... 790.00 SUBMITTED BY Registration No. Signature 45,640 Telephone (703) 760-7769 (Attorney/Agent)

Date

January 30, 2007

Name (Print/Type)

Jonathan Bockman